

Fighting Obesity in Nevada's Schools

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EXHIBIT _O _	_ · _ · _ · · · · · · · · · · · · · · ·	
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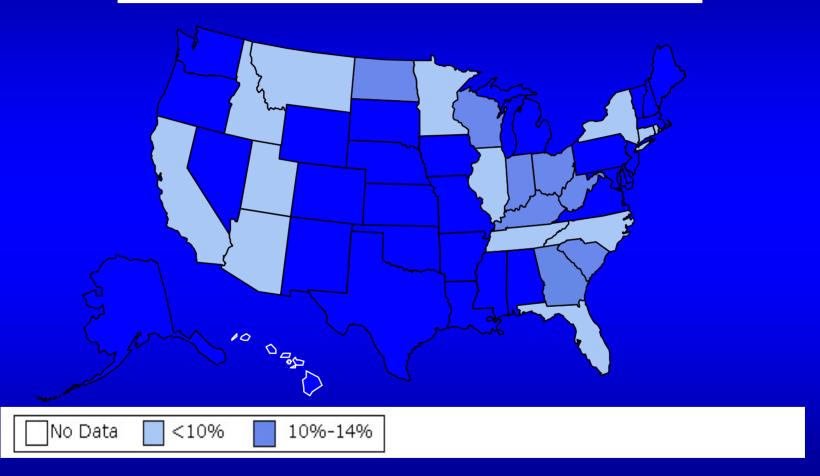


Obesity Defined

- Too much body fat
- A Body Mass Index of 30 or greater, or about 30 pounds or more overweight
- Extreme obesity is defined as a BMI of 40 or greater

Obesity Trends* Among U.S. Adults BRFSS, 1985

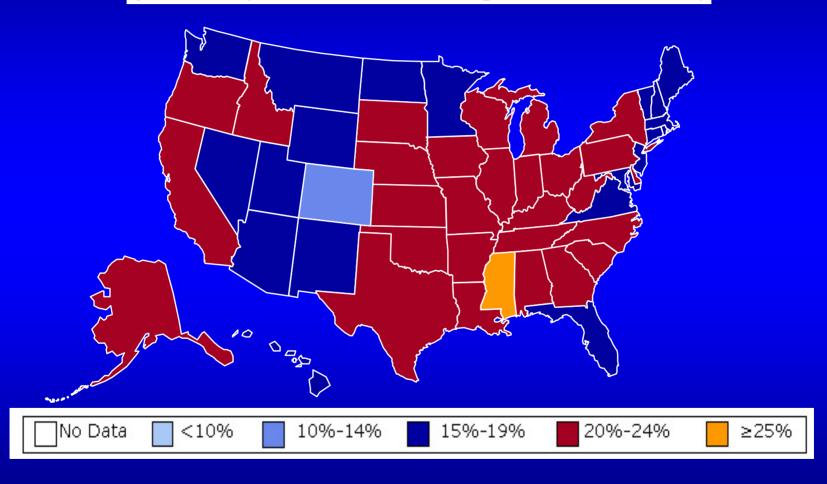
(*BMI ≥30, or ~ 30 lbs overweight for 5′4″ woman)



Source: Mokdad A H, et al. *J Am Med Assoc* 1999;282:16, 2001;286:10.

Obesity Trends* Among U.S. Adults BRFSS, 2001

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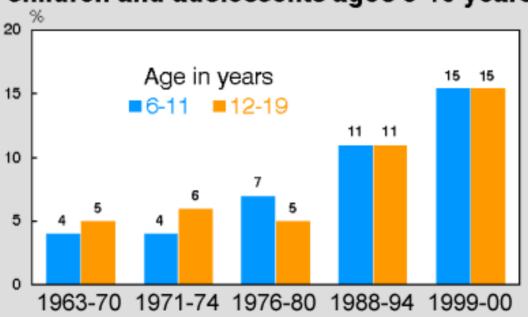


Source: Mokdad A H, et al. *J Am Med Assoc* 1999;282:16, 2001;286:10.



An Epidemic Among Children...

Figure 1. Prevalence of overweight among children and adolescents ages 6-19 years



NOTES: Excludes pregnant women starting with 1971-74. Pregnancy status not available for 1963-65 and 1966-70. Data for 1963-65 are for children 6-11 years of age; data for 1966-70 are for adolescents 12-17 years of age, not 12-19 years.

SOURCE: CDC/NCHS, NHES and NHANES.



Overweight Children

- Obese children more likely to become obese adults.
- "The percentage of young people who are overweight has doubled since 1980."
- "Of children aged 5 to 10 who are overweight, 61% have one or more cardiovascular disease risk factors..."
 (U.S. Department of Health and Human Services 2000b, p. 5).



Health Impact

- Raises blood cholesterol and triglyceride levels
- Lowers HDL "good" cholesterol
- Raises blood pressure levels
- Can induce diabetes; Type 2 diabetes, previously considered an adult disease, has increased tenfold in the past five years.

American Heart Association



Emotional Impact

 The most immediate consequence of overweight as perceived by the children themselves is social discrimination. This is associated with poor self-esteem and depression.



Economic Impact

- Direct medical costs associated with obesity:
 - \$56 billion in 1995; conservative estimate
 \$71 billion in 2000.
 - \$126 million for children and adolescents
- Annual costs for diseases associated with physical inactivity: \$76 billion

CDC



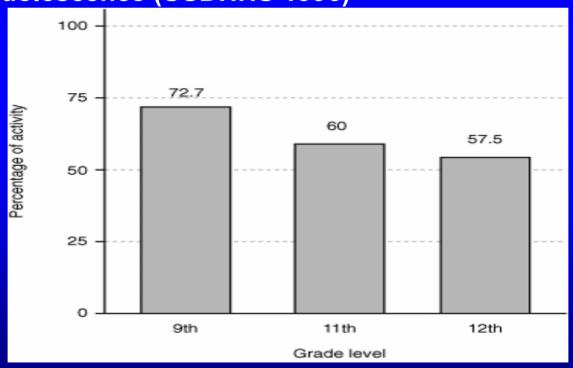
Benefits of Physical Activity Children & Adolescents





Physical Activity in Decline

 Physical activity levels decrease steadily during adolescence (USDHHS 1996)



Adapted from CDC 1997 (Kann et al. 1998).



Physical Activity in Decline

- In 2001, 32% of high school students reported attending PE classes Daily. (NYRBS, 2001)
- One recent study found that more than 40% of students did not meet the minimum health-related fitness standards for heart health. (CA Dept. of Ed. 1999)



Impact of Physical Inactivity

- When physical inactivity is combined with poor diet, the impact on health is devastating, accounting for an estimated 310,000 to 400,000 deaths per year.
- Tobacco use is the only behavior that kills more people.



Fighting Heart Disease and Stroke

Government calls for Increased Physical Activity

 "[The CDC and NIH have called] for more physical activity and physical education for all children. School boards should take note and heed their call... Daily, quality physical education in all schools is a sound investment in our nation's health and productivity."

Source: American School Board Journal, Oct. 2000



NASBE calls for Increased Physical Activity

The National Association of State Boards of Education (NASBE), in its "Fit, Healthy and Ready to Learn" policy statements, recommends a:

"sequential physical education curriculum taught daily in every grade . . . that involves . . . physical activity; that teaches knowledge, motor skills, and positive attitudes . . . taught by well-prepared and well-supported staff. . . .

Source: www.nasbe.org



Public Support for Physical Activity in Schools

- Harvard Health Forum Survey 2003
 - National survey of over 1,000 adults (Lake Snell Perry & Associates)
 - 92% support more physical activity in schools
 - Two thirds believe schools have a role in combating obesity



Parental Support for Physical Activity in Schools

- 76% think more school physical education could help control or prevent childhood obesity
- 95% think physical education should be part of a school curriculum for K-12
- 54% believe physical education is as important, or more important than math, science and English



American Heart Association Recommendation

- Children age 5 and older should:
 - participate in at least 30 minutes of enjoyable, moderate-intensity activities every day
 - perform at least 30 minutes of vigorous physical activities at least 3-4 days each week for cardiovascular fitness



Benefits of Physical Activity

Children and adolescents who are regularly physically active:

- Enhance skeletal development
- Increase muscle and bone strength
- May find it easier to control their weight
- Reduce anxiety and stress





P.E. & Academic Performance

- "Through its effects on mental health, physical activity may help increase students' capacity for learning" (UDDHHS 2000b).
- "... Spending more time in physical education did not have harmful effects on the standardized achievement scores of elementary school students" (Sallis et al. 1999).
- "In fact... participation in a two-year health-related physical education program had several significant favorable effects on academic achievement" (Sallis et al. 1999).



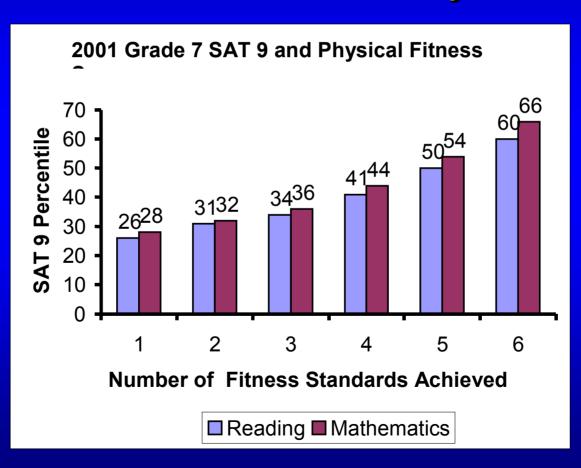
California BOE Study 2002



- Reading and mathematics scores were matched with fitness scores
- 353,000 fifth graders, 322,000 seventh graders, and 279,000 ninth graders



California BOE Study





Quality PE Program

Kids who increased their physical activity from three to five days a week showed

- 20% improvement in school attendance
- 20% improvement in school grades
- 50% reduction in smoking
- 60% reduction in drug and alcohol use

Source: Collingwood 2001



Physical Activity is Priceless: Yet the Price can be Low





Quality Physical Education / Physical Activity Doesn't Need to:

- Cost money
- Be conducted in a continuous 30 minute block
- Hurt





No/Low Cost Activities

- Integrated Activities (10 or 15 minute blocks of time)
- Walking Programs
- Classroom Exercises
 - Stretching
 - Dance
 - Relaxation





Leadership

Health Coordinators for each School District in Nevada. Coordinator:

- Develops curriculum for physical activity
- Promotes physical activity among schools in district
- Ensures nutrition and tobacco education programs are available
- Engages parents in providing healthy environments for kids at home.



Additional Resources

- Program Examples: Healthy Maine Partnership; Be Active Minnesota
- www.americanheart.org and ncsl.org/programs/health/health.htm
- Health Organization partners such as:
 - American Heart Association
 - American Cancer Society
 - Nevada Diabetes Association
 - Arthritis Foundation



The American Heart Association Urges the Nevada State Board of Education to:

- Strongly urge school districts to provide 30 minutes per day of structured moderate to vigorous physical activity for children in Grades K-12.
- Develop policy requiring schools currently conducting PE courses to include 30 minutes per day of vigorous physical activity in Grades K-12.



AHA recommendation, cont.

Encourage all schools to conduct simple fitness and behavior assessments at least once during the school year, to include:

- Health related / Cardiovascular fitness test
- Body Mass Index Measures

Provide results to the Nevada State Board of Education and to parents.